FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APP	ROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person* VERSEN MARIE J					2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify below) VP Qual Mgmt & Reg Compliance					
(Last) (First) (Middle) 9924 WEST 74TH STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/31/2005															
(Street) EDEN PRAIRIE MN 55344			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City) (State) (Zip)					Person														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transpose (Month/I				action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)						
								Code	v	Amount (A) or (D)		or F	rice Transact (Instr. 3 a				<u> </u>	,,	
Common Stock 02/01.)1/20	005 M		5,000	5,000 A		\$3.875	44,514		D							
Common Stock 02/01/)1/20	05			M		16,000	1	A :	8.065	60,5	514 D		D			
			Table II -	Deriva (e.g.,	ative puts	e Sec s, cal	curities	s Acqu rrants,	ired, D optior	oispo	osed of, onvertib	or Be le se	nefic curiti	ially (es)	Owned				
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if an		3A. Deemed Execution D if any (Month/Day/	d 4. Date, Transactio Code (Inst			5. Number of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				(Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	or Ni of	umber		(Instr. 4)			
Employee Stock Option (Right to Buy)	\$3.875	02/01/2005			M			5,000	(1)		09/21/2005	Comm Stoc		,000	\$ 0	0		D	
Employee Stock Option (Right to Buy)	\$8.0625	02/01/2005			M			16,000	(2)		09/20/2006	Comm Stoc		5,000	\$0	0		D	
Employee Stock Option (Right to Buy)	\$25.094								(3)		09/18/2007	Comm		2,000		12,000		D	
Employee Stock Option (Right to Buy)	\$29.17								(4)		03/17/2010	Comm Stoc		,000		8,000)	D	
Non- Qualified Stock Option (Right to Buy)	\$21.36								(5)		01/26/2011	Comm Stoc		,000		5,000)	D	
Non- Qualified Stock Option (Right to	\$29.37	01/31/2005			A		5,000		(6)		01/31/2012	Comm Stoc		,000	\$0	5,000)	D	

Explanation of Responses:

- 1. Exercisable in annual increments of 1,000 shares each commencing 9/21/99.
- 2. Exercisable in annual increments of 3,200 shares each commencing 9/20/00.
- 3. Exercisable in annual increments of 2,400 shares each commencing 9/18/01.
- 4. Exercisable in annual increments of 1,600 shares each commencing 3/17/04.
- 5. Exercisable in annual increments of 1,000 shares each commencing 1/26/05.
- 6. Exercisable in annual increments of 1,000 shares each commencing 1/31/06.

Remarks:

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.